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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

(0/030/86

50N-052/US

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |                   |                      |                                 | (Column 2)       |          | SMALL ENTITY TYPE   |                        | OR       | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|-------------------|----------------------|---------------------------------|------------------|----------|---------------------|------------------------|----------|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 30                |                      |                                 |                  |          | RATE                | FEE                    |          | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED      |                      | NUMBER EXTRA                    |                  |          | BASIC FEE           | 370.00                 | OR       | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 30 minus 20=      |                      | • 10                            |                  |          | X\$ 9=              |                        | OR       | X\$18=                     | 180                    |
| INDEPENDENT CLAIMS  |  |   | ) minus 3 =       |                      | *                               |                  |          | X42=                |                        | OR       | X84=                       |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT            |                      |                                 |                  |          | +140=               |                        | OR       | +280=                      |                        |
| * If the difference in column 1 is less than zero, e  |  |   |                   |                      | r "0" in c                      | olumn 2          |          | TOTAL               |                        | OR       | TOTAL                      | 120                    |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |   |                   |                      |                                 |                  | <b>)</b> | SMALL I             | ENTITY                 | OR       | OTHER<br>SMALL             | THAN                   |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 24                                      | Minus             | ** &                 | 30                              | =                |          | X\$ 9=              |                        | OR       | X\$18=                     |                        |
| AME   | Independent                                    | • 9                                       | Minus             |                      | 3                               | -                |          | X42=                |                        | OR       | X84=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                   |                      |                                 |                  | j        | +140=.              |                        | OR       | +280=                      |                        |
|   |  |   |                   |                      |                                 |                  |          | TOTAL<br>ADDIT, FEE |                        | OR       | TOTAL<br>ADDIT, FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                   |                      |                                 |                  |          |                     |                        | •        | · · · · · · · ·            |                        |
| MENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIG<br>NUI<br>PREV   | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
| N<br>Q  | Total  | *   | Minus             | ##                   |                                 |                  |          | X\$ 9=              |                        | OR       | X\$18=                     |                        |
| AME   | Independent                                    | *   | Minus             | ***                  | =                               | -                | 4        | X42=                |                        | OR       | X84=                       |                        |
|   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEI       | PENDEN               | IT CLAIM                        |                  |          | +140=               |                        | OR       | +280=                      |                        |
|   |  |   |                   |                      |                                 |                  |          | TOTAL<br>ADDIT. FEE |                        | OR       | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                   |                      |                                 |                  |          |                     |                        |          |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIG<br>NUI<br>PREV   | HEST<br>MBER<br>NOUSLY<br>D FOR | PRESENT<br>EXTRA | 7        | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **                   |                                 | 6                | _        | X\$ 9=              |                        | OR       | X\$18=                     |                        |
|   | Independent                                    | *   | Minus             | ***                  |                                 |                  | 4        | X42=                |                        | OR       | X84=                       |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                      |                                 |                  |          | +140=               |                        | 1        | +280=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                   |                      |                                 |                  |          |                     |                        | OR       | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1. |  |   |                   |                      |                                 |                  |          |                     |                        |          |                            |                        |
|   | The "Highest Nun                               | nber Previously P                         | aid For" (Total o | or Indeper           | ndent) is th                    | e highest num    | iber f   | ound in the ap      | propriate bo           | ex in co | olumn 1.                   |                        |